

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

P O BOX 500

Check if different  
than previously  
reported. (ACC)

RENVILLE

MN

56284

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00166348

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE**-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jerry A Bahma

Signature of Treasurer

Electronically Filed by Jerry A Bahma

Date

10

14

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		172100.26
(b) Cash on Hand at Beginning of Reporting Period .....	172523.52	
(c) Total Receipts (from Line 19) .....	1412.18	68330.44
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	173935.70	240430.70
7. Total Disbursements (from Line 31) .....	145000.00	211495.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	28935.70	28935.70
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	5000.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	660.00	56563.90
(i) Itemized (use Schedule A) .....	336.00	9225.75
(ii) Unitemized .....	996.00	65789.65
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	996.00	65789.65
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	416.18	2540.79
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1412.18	68330.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1412.18	68330.44

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	995.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	995.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	145000.00	205500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	5000.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	145000.00	211495.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	145000.00	211495.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	996.00	65789.65
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	996.00	65789.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	995.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	995.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

GLENN E AUGUSTINE

Mailing Address 20840 45TH STREET SE

City

LAKE LILLIAN

State

MN

Zip Code

56253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OP

Occupation

VICE PRESIDENT AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.13399

Amount of Each Receipt this Period

30.00

PAYROLL DEDUCTION

**B.**

Full Name (Last, First, Middle Initial)

GLENN E AUGUSTINE

Mailing Address 20840 45TH STREET SE

City

LAKE LILLIAN

State

MN

Zip Code

56253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OP

Occupation

VICE PRESIDENT AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.13400

Amount of Each Receipt this Period

30.00

PAYROLL DEDUCTION

**C.**

Full Name (Last, First, Middle Initial)

GLENN E AUGUSTINE

Mailing Address 20840 45TH STREET SE

City

LAKE LILLIAN

State

MN

Zip Code

56253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OP

Occupation

VICE PRESIDENT AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.13401

Amount of Each Receipt this Period

30.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

GLENN E AUGUSTINE

Mailing Address 20840 45TH STREET SE

City

LAKE LILLIAN

State

MN

Zip Code

56253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OP

Occupation

VICE PRESIDENT AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.13402

Amount of Each Receipt this Period

30.00

PAYROLL DEDUCTION

**B.**

Full Name (Last, First, Middle Initial)

GLENN E AUGUSTINE

Mailing Address 20840 45TH STREET SE

City

LAKE LILLIAN

State

MN

Zip Code

56253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OP

Occupation

VICE PRESIDENT AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.13403

Amount of Each Receipt this Period

30.00

PAYROLL DEDUCTION

**C.**

Full Name (Last, First, Middle Initial)

GLENN E AUGUSTINE

Mailing Address 20840 45TH STREET SE

City

LAKE LILLIAN

State

MN

Zip Code

56253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OP

Occupation

VICE PRESIDENT AGRICULTURE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.13404

Amount of Each Receipt this Period

30.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 33

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

JOHN RICHMOND

Mailing Address 3029 EAGLE RIDGE DRIVE E

City

WILLMAR

State

MN

Zip Code

56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OPERATIVE

Occupation

PRESIDENT &amp; CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	0	8

Transaction ID: SA11AI.13448

Amount of Each Receipt this Period

80.00

PAYROLL DEDUCTION

**B.**

Full Name (Last, First, Middle Initial)

JOHN RICHMOND

Mailing Address 3029 EAGLE RIDGE DRIVE E

City

WILLMAR

State

MN

Zip Code

56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OPERATIVE

Occupation

PRESIDENT &amp; CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	0	8

Transaction ID: SA11AI.13449

Amount of Each Receipt this Period

80.00

PAYROLL DEDUCTION

**C.**

Full Name (Last, First, Middle Initial)

JOHN RICHMOND

Mailing Address 3029 EAGLE RIDGE DRIVE E

City

WILLMAR

State

MN

Zip Code

56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN MN BEET SUGAR CO-  
OPERATIVE

Occupation

PRESIDENT &amp; CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	6	/	2	0	0	8

Transaction ID: SA11AI.13450

Amount of Each Receipt this Period

80.00

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional) .....

240.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 33

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

JOHN RICHMOND

Mailing Address 3029 EAGLE RIDGE DRIVE E

City

WILLMAR

State

MN

Zip Code

56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN MN BEET SUGAR CO-  
OPERATIVE

Occupation

PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.13451

Amount of Each Receipt this Period

80.00

PAYROLL DEDUCTION

**B.**

Full Name (Last, First, Middle Initial)

JOHN RICHMOND

Mailing Address 3029 EAGLE RIDGE DRIVE E

City

WILLMAR

State

MN

Zip Code

56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN MN BEET SUGAR CO-  
OPERATIVE

Occupation

PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.13452

Amount of Each Receipt this Period

80.00

PAYROLL DEDUCTION

**C.**

Full Name (Last, First, Middle Initial)

JOHN RICHMOND

Mailing Address 3029 EAGLE RIDGE DRIVE E

City

WILLMAR

State

MN

Zip Code

56201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN MN BEET SUGAR CO-  
OPERATIVE

Occupation

PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.13453

Amount of Each Receipt this Period

80.00

PAYROLL DEDUCTION

**SUBTOTAL** of Receipts This Page (optional) .....

240.00

**TOTAL** This Period (last page this line number only) .....

660.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 33

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)  
FIRST SECURITY BANK-STORDEN

Mailing Address PO BOX 429

City State Zip Code  
RENVILLE MN 56284

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2348.17

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA17.13472

Amount of Each Receipt this Period

223.56

JULY INTEREST

**B.**

Full Name (Last, First, Middle Initial)  
FIRST SECURITY BANK-STORDEN

Mailing Address PO BOX 429

City State Zip Code  
RENVILLE MN 56284

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2529.64

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 8

Transaction ID: SA17.13473

Amount of Each Receipt this Period

181.47

AUGUST INTEREST

**C.**

Full Name (Last, First, Middle Initial)  
FIRST SECURITY BANK-STORDEN

Mailing Address PO BOX 429

City State Zip Code  
RENVILLE MN 56284

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2540.79

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: SA17.13474

Amount of Each Receipt this Period

11.15

SEPTEMBER INTEREST

**SUBTOTAL** of Receipts This Page (optional) .....

416.18

**TOTAL** This Period (last page this line number only) .....

416.18

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 33

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
**ABERCROMBIE FOR CONGRESS**

Mailing Address c/o 1357 Kapiolani Blvd. Ste. 1005  
c/o 1357 Kapiolani Blvd. Ste. 1005

City Honolulu State HI Zip Code 96814

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: HI District: 01

**Transaction ID:** SB23.13484

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**ADRIAN SMITH FOR CONGRESS**

Mailing Address 3321 avenue I suite 6  
SUITE 6

City Scottsbluff State NE Zip Code 69361

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NE District: 03

**Transaction ID:** SB23.13561

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SUGARBEET GROWERS ASS'N PAC**

Mailing Address 1156 15TH ST NW SUITE 1101

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.13475

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**7000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ARCURI FOR CONGRESS

Mailing Address P.O. Box 8508

City  
Utica

State  
NY

Zip Code  
13505

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: SB23.13485

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

BILL FOSTER FOR CONGRESS COMMITTEE

Mailing Address PO Box 703

City  
Geneva

State  
IL

Zip Code  
60134

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 14

Transaction ID: SB23.13527

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

BOB ETHERIDGE FOR CONGRESS COMMITTEE

Mailing Address 303 WEST JONES STREET SUITE 220  
 PO BOX 28001

City  
RALEIGH

State  
NC

Zip Code  
27611

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 02

Transaction ID: SB23.13526

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

BOSWELL FOR CONGRESS

Mailing Address PO Box 6220

City  
Des Moines

State  
IA

Zip Code  
50309

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 03

**Transaction ID:** SB23.13517

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

CARDOZA FOR CONGRESS

Mailing Address 555 Capitol Mall Suite 1425

City  
Sacramento

State  
CA

Zip Code  
95814

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 18

**Transaction ID:** SB23.13487

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

CAZAYOUX FOR CONGRESS

Mailing Address POB 3172

City  
Baton Rouge

State  
LA

Zip Code  
70821

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District: 06

**Transaction ID:** SB23.13488

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A. CHARLES BOUSTANY JR MD FOR CONGRESS INC**

Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 80126

City Lafayette State LA Zip Code 70598

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District: 07

Transaction ID: SB23.13518

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

**B. CHARLIE MELANCON CAMPAIGN COMMITTEE INC**

Full Name (Last, First, Middle Initial)

Mailing Address 511 CONGRESS ST  
PO BOX 549

City NAPOLEONVILLE State LA Zip Code 70390

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: LA District: 03

Transaction ID: SB23.13502

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	0	8

Amount of Each Disbursement this Period

1000.00

**C. CHET EDWARDS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 23273

City Waco State TX Zip Code 76702

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 17

Transaction ID: SB23.13522

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

4000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
CIRO D. RODRIGUEZ FOR CONGRESS

Mailing Address PO Box 14528

City State Zip Code  
San Antonio TX 78214

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 23

Transaction ID: SB23.13554

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR ALTMIRE

Mailing Address P.O. Box 1776

City State Zip Code  
Freedom PA 15042

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 04

Transaction ID: SB23.13515

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR HARKIN

Mailing Address P O BOX 811

City State Zip Code  
DES MOINES IA 50304

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 00

Transaction ID: SB23.13536

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CONTINUING A MAJORITY PARTY ACTION COMMITTEE (CAM-PAC)</b> Mailing Address 5915 Eastman Avenue Suite 100	<b>Transaction ID:</b> SB23.13490 <b>Date of Disbursement</b> <div> <div>08</div> <div>07</div> <div>2008</div> </div>
City Midland State MI Zip Code 48640 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) <b>DAN SEALS FOR CONGRESS</b> Mailing Address P.O. Box 584 City Wilmette State IL Zip Code 60091 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.13557 <b>Date of Disbursement</b> <div> <div>08</div> <div>28</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>5000.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) <b>DAVID SCOTT FOR CONGRESS</b> Mailing Address P.O. BOX 960821 City RIVERDALE State GA Zip Code 30296 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 13 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.13556 <b>Date of Disbursement</b> <div> <div>08</div> <div>28</div> <div>2008</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2000.00</div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**12000.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

ELLISON FOR CONGRESS

Mailing Address PO BOX 11818

City  
MINNEAPOLIS

State  
MN

Zip Code  
55411

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 05

Transaction ID: SB23.13523

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

ELLSWORTH FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 62

City  
Evansville

State  
IN

Zip Code  
47701

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 08

Transaction ID: SB23.13525

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

FOLLOW THE NORTH STAR FUND

Mailing Address 3302 BELDEN DR NE

City  
MINNEAPOLIS

State  
MN

Zip Code  
55418

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.13493

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF CONGRESSMAN TIM HOLDENMailing Address 18 N. SECOND STREET PO BOX 37  
PO BOX 37

City SAINT CLAIR State PA Zip Code 17970

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 17

Transaction ID: SB23.13495

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	0	8

Amount of Each Disbursement this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF GORDON SMITH

Mailing Address 228 S WASHINGTON STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OR District: 00

Transaction ID: SB23.13562

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JIM MARSHALL

Mailing Address P.O. B0x 125

City Macon State GA Zip Code 31201

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District: 03

Transaction ID: SB23.13499

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	0	8

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional) .....

9000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS OF JIM OBERSTAR

Mailing Address 424 WARNER STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20001

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 08

Transaction ID: SB23.13553

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

**B.**

Full Name (Last, First, Middle Initial)

FRIENDS OF JOHN BARROW

Mailing Address PO Box 8166

City  
Savannah

State  
GA

Zip Code  
31412

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District: 12

Transaction ID: SB23.13516

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

FRIENDS OF ROSA DELAURO

Mailing Address 49 HUNTINGTON STREET

City  
NEW HAVEN

State  
CT

Zip Code  
06511

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 03

Transaction ID: SB23.13492

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
GILLIBRAND FOR CONGRESS

Mailing Address P.O. Box 1279

City Hudson State NY Zip Code 12534

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 20

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.13532

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
HEATH SHULER FOR CONGRESS

Mailing Address PO Box 8446

City Asheville State NC Zip Code 28814

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 11

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13559

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
HOOSIERS FOR HILL

Mailing Address PO Box 1071

City Seymour State IN Zip Code 47274

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IN District: 09

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13538

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

JIM COSTA FOR CONGRESS

Mailing Address 2037 WEST BULLARD PMB #509

City  
FRESNOState  
CAZip Code  
93711Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 20

Transaction ID: SB23.13519

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

JOE DONNELLY FOR CONGRESS

Mailing Address PO Box 1961

City  
South BendState  
INZip Code  
46634Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 02

Transaction ID: SB23.13521

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN HALL FOR CONGRESS

Mailing Address PO Box 469

City  
BeaconState  
NYZip Code  
12508Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: SB23.13534

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) .....

6500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
JOHN SALAZAR FOR CONGRESS

Mailing Address P.O. Box 1737

City Alamosa State CO Zip Code 81101

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CO District: 03

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.13510

Date of Disbursement

08 / 07 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
KAGEN 4 CONGRESS

Mailing Address 100 W. College Ave.  
50 D

City Appleton State WI Zip Code 54911

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: WI District: 08

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.13539

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
KAPTUR FOR CONGRESS

Mailing Address P.O. Box 899  
P.O. Box 899

City Toledo State OH Zip Code 43697

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 09

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13497

Date of Disbursement

08 / 07 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

KENDRICK MEEK CAMPAIGN FOR CONGRESS

Mailing Address 111 NW 183rd Street  
Suite 325

City State Zip Code  
Miami FL 33169

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 17

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.13501

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

KLEIN FOR CONGRESS

Mailing Address 21301 POWERLINE ROAD SUITE 204

City State Zip Code  
BOCA RATON FL 33433

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 22

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13541

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

KLINE FOR CONGRESS

Mailing Address PO Box 21632

City State Zip Code  
Eagan MN 55121

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MN District: 02

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13542

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

**9000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

KUHL FOR CONGRESS

Mailing Address 10 GANESVOORT STREET

City BATH State NY Zip Code 14810

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 29

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.13498

Date of Disbursement

08 / 07 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

LAMPSON FOR CONGRESS

Mailing Address P.O. Box 58606

City Houston State TX Zip Code 77258

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: TX District: 22

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13546

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

3000.00

C.

Full Name (Last, First, Middle Initial)

LEVIN FOR CONGRESS

Mailing Address 230 North Avenue

City Mt. Clemens State MI Zip Code 48043

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 12

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13547

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) .....

6000.00

TOTAL This Period (last page this line number only) .....



	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

FEC Schedule B ( Form 3X) (Revised 02/2003)

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
MCCOLLUM FOR CONGRESS

Mailing Address P.O. Box 14131

City State Zip Code  
St. Paul MN 55114

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MN District: 04

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13500

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)  
MCCOLLUM FOR CONGRESS

Mailing Address P.O. Box 14131

City State Zip Code  
St. Paul MN 55114

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MN District: 04

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13566

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
MCNERNEY FOR CONGRESS

Mailing Address 6520 Village Parkway  
Second Floor

City State Zip Code  
Dublin CA 94568

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 11

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13550

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
MIKE MCINTYRE FOR CONGRESS

Mailing Address P.O. Box 1

City Lumberton State NC Zip Code 28359

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 07

Transaction ID: SB23.13549

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	0	8

Amount of Each Disbursement this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
MINNESOTA FARM BUREAU FEDERATION POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 64370

City ST. PAUL State MN Zip Code 55164

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.13477

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	0	8

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
MONTANANS FOR TESTER

Mailing Address PO BOX 1135

City HELENA State MT Zip Code 59624

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MT District: 00

Transaction ID: SB23.13512

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	0	8

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

8000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

## **A. Full Name (Last, First, Middle Initial) MUSGRAVE FOR CONGRESS**

Mailing Address 5401 STONE CREEK CIRCLE SUITE 777

City LOVELAND State CO Zip Code 80538

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 04

Transaction ID: SB23.13552

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

## **B. Full Name (Last, First, Middle Initial) NATIONAL FARMERS UNION POLITICAL ACTION COMMITTEE (NATF- ARMPAC)**

Mailing Address 5619 DTC Parkway Suite 300

City Greenwood Village State CO Zip Code 80111

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.13480

Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

5000.00

## **C. Full Name (Last, First, Middle Initial) PETERSON FOR CONGRESS**

Mailing Address 26192 Floyd Lake Point Road

City Detroit Lakes State MN Zip Code 56501

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 07

Transaction ID: SB23.13482

Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 33

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) POMEROY, EARL RALPH	<b>Transaction ID:</b> SB23.13505 <b>Date of Disbursement</b>
Mailing Address PO BOX 746	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 7 / 2 0 0 8</div> </div>
City BISMARCK State ND Zip Code 58502	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CONTRIBUTION	<div>2000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) PROGRESSIVE VOTERS OF AMERICA	<b>Transaction ID:</b> SB23.13508 <b>Date of Disbursement</b>
Mailing Address PO BOX 852	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 7 / 2 0 0 8</div> </div>
City BURLINGTON State VT Zip Code 05402	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CONTRIBUTION	<div>1000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) STEPHANIE HERSETH SANDLIN FOR SOUTH DAKOTA	<b>Transaction ID:</b> SB23.13537 <b>Date of Disbursement</b>
Mailing Address PO Box 2009	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 2 8 / 2 0 0 8</div> </div>
City Sioux Falls State SD Zip Code 57101	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CONTRIBUTION	<div>1000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
TIM JOHNSON FOR SOUTH DAKOTA INC

Mailing Address PO BOX 1859

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House ☒ Senate ☐ President  
State: SD District: 00

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13564

Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
TIM MAHONEY FOR FLORIDA

Mailing Address 1128-408 ROYAL PALM BEACH BLVD

City ROYAL PALM BEACH State FL Zip Code 33411

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: FL District: 16

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.13548

Date of Disbursement

08 / 28 / 2008

Amount of Each Disbursement this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
TIM WALZ FOR US CONGRESS

Mailing Address PO BOX 938

City MANKATO State MN Zip Code 56002

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: MN District: 01

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.13476

Date of Disbursement

07 / 10 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) TIM WALZ FOR US CONGRESS	<b>Transaction ID:</b> SB23.13483 <b>Date of Disbursement</b>
Mailing Address PO BOX 938	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 1 / 2 0 0 8</div> </div>
City MANKATO State MN Zip Code 56002	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CONTRIBUTION	<div>2500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) TIM WALZ FOR US CONGRESS	<b>Transaction ID:</b> SB23.13567 <b>Date of Disbursement</b>
Mailing Address PO BOX 938	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 8</div> </div>
City MANKATO State MN Zip Code 56002	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement VOIDED CHECK FROM 5/09/08	<div>-2500.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) ZACK SPACE FOR CONGRESS COMMITTEE	<b>Transaction ID:</b> SB23.13511 <b>Date of Disbursement</b>
Mailing Address 714 N WOOSTER AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 7 / 2 0 0 8</div> </div>
City DOVER State OH Zip Code 44622	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement CONTRIBUTION	<div>2000.00</div>
Candidate Name	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

145000.00

**SCHEDULE C (FEC Form 3X)**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE 13 OF FORM 3X

**LOANS**

NAME OF COMMITTEE (In Full)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Transaction ID: SC/9.13393

**LOAN SOURCE** Full Name (Last, First, Middle Initial)WESTERN SUGAR COOPERATIVE POLITICAL ACTION CO-  
MMITTEE

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 400 GREAT WESTERN AVE

City LOVELL

State WY

ZIP Code 82431

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M  
0 5D D  
2 7Y Y Y Y  
2 0 0 8

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed

Outstanding:

**SUBTOTALS** This Period This Page (optional) ▶

5000.00

**TOTALS** This Period (last page in this line only) ▶

5000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



Form/Schedule: **SC/9**

Transaction ID: **SC/9.13393**

Have been informed by the Reports Analysis division that due to a software limitation the loan due date and interest rate cannot be entered. The due date of the loan is 12/31/08 and the interest rate is 0%. (none)